Project Number (to be assigned by ABP) 200937	
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FISCAL YEAR 2011 ANNUAL PLAN PROJECT NOMINATION FORM

1. Nominating Party (Please note af	ffiliation, i.e. Parish, Association, Organization)
Name: Danny Bulliard	Affiliation:
Address: 1045 Little Oak Dr. St. Ma	artinville, LA 70582
Phone: 337-394-7612	email:
•	e give a brief description of problem and current area relates to water quality, sediment accumulation, access, es, please indicate as well).
Breach in bank of G.A. cut acros	ss from Ruiz cut. Sanding up Gravenburg. the old cut was
damned up, the new one eroded it's	way through
. ?	
,	
3. Project Boundary: (attach map sho	owing specific location of project area):
Parish: St. Matrin & Iberia Wate	er Management Unit (if known): Buffalo Cove
Lat/Long (if known):	
4. Affected Area: (attach map of the	area anticipated to benefit from project- if known)

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5. Action Description: (any proposed action or suggestion to rectify the problem. List any anticipated benefits from the project-if known)
Dam up cut
6. Survey and Preliminary Assessments: (Please attach any pertinent information or documents that you might have pertaining to the problem area for review and provide a list of the documents you have attached.)
7. Additional information regarding the project area, problem or proposed action (if known):
state land
State faire
Please bring this form to one of the meetings listed or fax it to (225) 342-6887, return by mail
Toni DeBosier Louisiana Department of Natural Resources
Atchafalaya Basin Program
P O Box 94396
Baton Rouge, LA 70804

